Provider Complaint & Appeal Summary Report

Health Plan ID: 2162934

Health Plan Name: AmeriHealth Caritas Louisiana

Health Plan Contact: ***
Contact Email: ***

Report Period Start Date: 20131101 Report Period End Date: 20131130

BAYOU HEALTH Reporting

Document ID: PI182

Document Name: PROVIDER COMPLAINT & APPEAL SUMMARY REPORT

Reporting Frequency: Monthly

Report Due Date: 15th of the month following end of reporting period

File Type: Excel

Subject Matter: Informatics (I)

Summary of	By Health	By		
Appeal Decisions	Plan	Arbitration		
otal # Decisions	52	0		
% Upheld	42%	0		
% Overturned	58%	0		
% Withdrawn	0	0		

		Total # of	# of COMPLAINTS by ISSUE CATEGORY					# Complaints Pending or	•		By Appeal Type			# Appeals Pending or		
Reporting Period	COMPLAINT STATUS	Provider Complaints	Claims / Payments	Covered Services	PAs/Referrals	PCP Auto-Assign/ Linkages	Provider Registry/ Directory	Lack of Information /Response	Other	Closed 31 to 90 Days Post File Date ¹	Closed >90 Provide	Provider Appeals		Payment Denial	_	Closed >90
	Received this Month	722	684	1	0	0	3	4	30	0	0	50	50			
	Total Closed this Month	698	661	1	0	0	3	4	29	0	0	60	60		4	. 0
	Withdrawn by Provider															
	Per Internal Plan Action/Decision	698	661	1	0	0	3	4	29	0	0	52	. 52		4	. 0
	Per Independent Arbitration															
	Per DHH Review															
Nov-2013	Other (Review determined not a complaint)											8	8		0	0
	Total Pending (cumulative as of month end)	69	68	0	0	0	0	0	1	0	0	9	9	0	0	0
	Information needed from Provider															
	Internal Plan Review	69	68	0	0	0	0	0	1	0	0	9	9	0	0	0
	Independent Arbitration															
	DHH Review															
	Other (Review determined not a complaint)															
	Total Complaints Received YTD	11478	10838	12	19	1	25	74	509			410	410			
	Total Closed YTD	11491	10848	12	20	1	27	74	509	23	0	405	405		6	0
2013	Withdrawn by Provider															
Year to Date (YTD)	Per Internal Plan Decision/Correction	11491	10848	12	20	1	27	74	509	23	0	389	389		5	0
	Per Independent Arbitration															
	Per DHH Decision															
	Other (Review determined not a complaint)											16	16		1	. 0

¹You must submit Attachment 1 - Complaint Summary Listing detailing all pending or closed (A1) complaints not resolved within 30 to 90 days

²You must submit Attachment 2 - Appeal Summary Listing detailing all pending or closed (A1) appeals not resolved within 30 to 90 days.

PI 182 - Attachment 1: Summary listing of Complaints Pending or Closed in Current Reporting Month that were closed 30 to 90 or more days after Original Date Filed

Health Plan Name: AmeriHealth Caritas Louisiana

Reporting Period: November-2013

Status Category Codes						
Pending	Closed					
P1-Information needed from Provider	C1-Withdrawn by Provider					
P2-Internal Plan Review	C2-Per Internal Plan Action/Decision					
P3-Per Independent Arbitration	C3-Per Independent Arbitration					
P4-Referred to DHH	C4-Per DHH Review					
P5-Other	C5-Other					

Date Filed (YYYYMMDD)	Name of Person Filing Complaint	Organization	Summary of Complaint	Summary of Attempts to Resolve Complaint	Date Closed (YYYYMMDD)	# of Days Pending or to Close	Status Category
No data to report							

PI 182 - Attachment 2: Summary listing of Appeals Pending or Closed in Current Reporting Month that were closed 30 to 90 or more days after Original Date Filed

Health Plan Name: AmeriHealth Caritas Louisiana

Reporting Period: November-2013

Status Category Codes					
Pending	Closed				
P1-Information needed from Provider	C1-Withdrawn by Provider				
P2-Internal Plan Review	C2-Per Internal Plan Action/Decision				
P3-Per Independent Arbitration	C3-Per Independent Arbitration				
P5-Other	C5-Other				

Date Filed (YYYYMMDD)	Name of Person Filing Appeal	Organization	Summary of Complaint	Date Closed (YYYYMMDD)	# of Days Pending or to Close	Status Category
11-Oct-13	***	***	In Patient Hospitalization	18-Nov-13	38	C2
17-Oct-13	***	***	Imaging	26-Nov-13	40	C2
22-Oct-13	***	***	Providers Office Visit	24-Nov-13	33	C2
12-Oct-13	***	***	In Patient Hospitalization	12-Nov-13	31	C2